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Please type a plus sign (+) inside this box → ☒

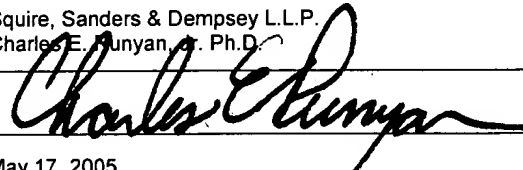
Approved for use through 10/31/2002. OMB 0651-0031

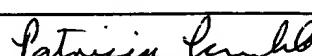
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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PTO TRANSMITTAL FORM MAY 17 2005 (to be used for all correspondence after initial filing)	Application Number	09/748,412	
	Filing Date	December 21, 2000	
	First Named Inventor	Wouter E. Roorda	
	Group Art Unit	3738	
	Examiner Name	Hieu Phan	
Total Number of Pages in This Submission (excluding references)	11	Attorney Docket Number	50623.26

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Response (7 pages) <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> Express Mail Label No. EV 337 971 611 US <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Amendment Transmittal Letter (in duplicate) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;">Interview Request Form (1 page)</p>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Charles E. Runyan, Jr. Ph.D.
Signature	
Date	May 17, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Mail Stop Amendments, Commissioner for Patents, Washington, D.C. 20231 on the date indicated below			
Typed or printed name	Patricia Gamble		
Signature		Date	May 17, 2005

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AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Wouter E. Roorda

Docket No.

50623.26

Serial No.

09/748,412

Filing Date

December 21, 2000

Examining Officer

Hieu Phan

Group Art Unit

3738

Invention:

Device and Active Component For Inhibiting Formation Of Thrombus-Inflammatory Cell Matrix

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.


The fee has been calculated and is transmitted as show below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	11	20	0	X \$50.00	\$00.00
INDEP. CLAIMS	5	8	0	X \$200.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. 07-1850 in the amount of \$00.00
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850
A duplicate copy of this sheet is enclosed.
- ☐ Any additional filing fees required under 37 C.F.R. 1.16
- ☐ Any patent application processing fees under 37 C.F.R. 1.17

Dated: May 17, 2005
Squire, Sanders & Dempsey L.L.P.
1 Maritime Plaza, Suite 300
San Francisco, CA 94111
(415) 954-0200


Charles E. Runyan
Reg. No. 43,066

cc: Docket:

MAY 17 2005

PTOL-413A (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**Applicant Initiated Interview Request Form**

Application No.: 09/748,412 First Named Applicant: Wouter E. Roorda
Examiner: Hieu Phan Art Unit: 3738 Status of Application: Pending

Tentative Participants:

(1) Charles E. Runyan, Jr. (2) Hieu Phan
(3) Corrine M. McDermott (4) _____

Proposed Date of Interview: To be DecidedProposed Time: (AM ☐/PM ☐)**Type of Interview Requested:**

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☒ NO

If yes, provide brief description: _____

Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>102(b)rejection</u>	All outstanding	Pat. No. 5,609,629	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached**Brief Description of Arguments to be Presented:**

U.S. Patent 5,609,629 does not teach layers containing a thrombi inhibitor separate from a macrophage inhibitor. Also, Fearnot does not teach the arrangement of these layers as recited in claims.

An interview was conducted on the above-identified application on _____

NOTE: This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Applicant/Applicant's Representative Signature

Examiner/SPE Signature

Charles E. Runyan, Jr. Ph.D.

Typed/Printed Name of Applicant or Representative
43,055

Registration Number, if applicable

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.